

Contract no.:

Name of DBE business:

Name of DBE representative:

DBE certification number:

Name of bidder:

Name of prime contractor if different from the bidder:

Name of representative of bidder or prime contractor.

Date: _____

¹If 100% of an item is not to be performed or furnished by the DBE, describe the exact portion of the item to be performed or furnished.

Total

113286

As an authorized representative of a certified disadvantaged business enterprise, I confirm that my business was contacted by the bidder or prime contractor shown above regarding the contract shown above. If the bidder is awarded the contract, my business will enter into a contractual agreement with the bidder or prime contractor to perform the type and dollar amount of work shown on the DBE Commitment form.

I certify under penalty of perjury that the foregoing is true and correct.

Signature of DBE's authorized representative:

Printed name of DBE's authorized representative:

Title of DBE's authorized representative:

Date: _____

ADA Notice

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Contract No. 07-307304

**Caltrans®****STATE OF CALIFORNIA
DEPARTMENT OF TRANSPORTATION****FORMS FOR
BID**

**FOR CONSTRUCTION ON STATE HIGHWAY IN LOS ANGELES COUNTY NEAR CASTAIC
ON ROUTE 5 FROM VIOLIN CANYON ROAD TO 0.3 MILE SOUTH OF FOREST SERVICE
UNDERCROSSING AND IN PALMDALE AND LANCASTER ON ROUTE 14 FROM
SHADOW PINES BOULEVARD TO KERN COUNTY LINE**

In District 07 On Route 5, 14

Under

Notice to Bidders and Special Provisions dated August 1, 2016

Standard Specifications dated 2010

Project plans approved December 28, 2015

Standard Plans dated 2010

Applicable to

Electronic Bid book dated August 1, 2016

Identified by

Contract No. 07-307304

07-LA-5, 14-R59.7/R73.2, 35.5/R77.1

Project ID 0714000218

Federal-Aid Project

ACHSNHPG-X037(189)E

08-25-16A11:13 RCVD

CONTRACT NO: 07-307304

BID AMOUNT: \$ 994,470.00

BID OPENING DATE: 8-23-16

BIDDER'S NAME: STERNDAHL ENTERPRISES INC.

DBE GOAL FROM CONTRACT %: 9

DBE PRIME CONTRACTOR CERTIFICATION¹: TOTAL NUMBER OF ALL SUBCONTRACTS (DBE & NON-DBE) TOTAL VALUE OF ALL SUBCONTRACTS (DBE & NON-DBE)

		2		650,376-
BID ITEM NO.	ITEM OF WORK AND DESCRIPTION OF SERVICES TO BE SUBCONTRACTED OR MATERIALS TO BE PROVIDED ²	WORK CATEGORY CODES ³	NAME OF DBEs (Must be certified on the date bids are opened. Include Caltrans' certification no., DBE address, and phone number. Show 2nd and lower tier subcontractors)	AMOUNT (\$)
2	CONST. AREA SIGNS		KRL SAFETY CO.	27156
3	TRAFFIC CONTROL		KRL SAFETY CO.	86130

Show all DBE firms being claimed for credit, regardless of tier. Attach written confirmation from each DBE shown stating that it will be participating in the contract to perform the specific work shown for the specific amount agreed to.

The names of the 1st tier DBE subcontractors and items of work must be consistent with the Subcontractor List (Pub Cont Code § 4100 et seq.).

¹Each DBE prime contractor must enter its certification number and show all work to be performed by DBEs, including work performed by its own forces.

²If 100% of an item is not to be performed or furnished by the DBE, describe the exact portion of the item to be performed or furnished.

³Use Work Category Codes from the California Unified Certification Program database.

Total Claimed
Participation

\$ 113,286

11.4 %

The bidder acknowledges that it is committed to use the DBEs shown on this form to meet the contract goal (49 CFR 26.53).

Signature of Bidder

8-23-16
Date

818 834-8199
(Area Code) Tel. No.

DENNIS R. STERNDAHL
Person to Contact (Please Type or Print)

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KRC SAFETY CO., INC.**BARRICADE RENTAL - TRAFFIC CONTROL**

7821 W. Sunnyview Ave Visalia, CA 93291

Phone (559) 732-0393 ~ Fax (559)732-2684

WWW.KRCSAFETY.COM

To: Estimator
 Project: 07-307304
 Bid Date: 8/23/2016

07-La-5,14

UN:265 / D:271

KRC BID # 16-600

UNION, LICENSE #507950 (A, C31), DBE (NATIVE AMERICAN) #000447, SBE #6897, MBE #9IS00114

Item#	Description	U/M	Qty	Rate	Total
2	Construction Area Signs	LS	1	27,156.00	27,156.00
	SC6-3 / SC6-4 / SP-1 Post Mounted Ramp Notification Signs Per Each - TBD	ca	1	190.00	190.00
3	Traffic Control System - See traffic control quote for rates				
	Note: (1) addendum(s) acknowledged. Note: If items are not tied together within these notes items may be split. Note: Item 2 includes signs from CS-1, CS-2 and (4) construction project funding signs only. Signs will be furnished, installed and removed. Note: SC6-3 / SC6-4 / SP-1 (Ramp Notification Signs) if used will be installed and removed in conjunction with primary construction area signs. Note: Portable changeable message signs not included in item 2 or 3. Note: KRC SAFETY will notify U.S.A for its work only at no extra charge to the prime contractor Note: Prior to accepting this quote all stipulations listed on quote and the "Attachment A" must be understood and accepted.				



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To: Estimator
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 Bid Date: 8/23/2016

07-La-5,14

UN:265 / D:271

KRC BID # 16-600

UNION, LICENSE #507950 (A, C31), DBE (NATIVE AMERICAN) #000447, SBE #6897, MBE #9IS00114

Item#	Description	Rate
3	<p>Traffic Control System</p> <p>1 Impact attenuator vehicle with driver - Per 8 hour shift 1 man lane closures - Per 8 hour shift 2 man lane/ramp closures - Per 8 hour shift 3 man lane/ramp closures (Includes IAV) - Per 8 hour shift Additional arrow board(s) per shift (includes lane) applicable delivery and pick up fees will be added</p> <p>- All traffic control trucks include up to 300 cones, (2) arrow boards, applicable equipment to close 2 lanes in same direction and or 1 lane in opposite directions, applicable on/off ramp closure equipment for up to 2 ramps within the closure, (6) beacons with batteries & (24) flag stands. All traffic control trucks are also equipped with (1) T13 set up. - Cancellations made less than 12 hours notice of requested show up time will be charged at 60% of quoted rates, all cancellations MUST be received in written form, via fax or e-mail. - Impact attenuator vehicle (IAV) & traffic control crews are subject to availability - If contractor elects to use (1) man closure option contractor must supply KRC with a qualified and knowledgeable traffic control tech to help set out and pick up equipment. - Time starts when first piece of equipment is placed and ends when last piece of equipment is picked up. - Please allow 30-60 minutes on each side of shift for placing and removing equipment. - KRC's 2 or 3 man crew must be used for all ramp closures. - SC6-3, SC6-4 or SP-1 (ramp notification signs) are not included in traffic control quoted rates. - Required detour signage per the special provisions and all closure charts is included in all quoted traffic control prices. - Portable changeable message boards are not included in quoted traffic control rates. - All overtime (8-12 hours) will be charged at \$97.50 per hour per man - All double time (over 12 hours) will be charged at \$112.50 per hour per man - Add \$200.00 per laborer to the first (8) hours of all Saturday traffic control shifts. After 8 hours applicable overtime/double time rate per man per hour will apply. - Add \$295.00 per laborer to the first (8) hours of all Sunday traffic control shifts. After 8 hours applicable double time rate per man per hour will apply. - Prior to accepting this quote all stipulations listed on quote and the "Attachment A" must be understood and accepted.</p> <p>Rental Option Only For Equipment Listed Below</p> <p>Portable Changeable Message Sign - Per Each, Rental Only \$150.00/Day : \$400.00/Week : \$1,000.00/Month (Month rate based on 30 calendar days) Contractor is fully responsible for PCMS when on rent, this includes any vandalism \$85.00 delivery fee per PCMS : \$85.00 pick up fee per PCMS</p> <p>Impact Attenuator Vehicle (IAV) - Rental Only - Subject To Availability \$350.00/Day : \$1,500.00/Week : \$3,000.00/Month (Month rate based on 30 calendar days) \$250.00 delivery fee will apply : \$250.00 pick up fee will apply Proper insurance certificate must be on file with KRC prior to pickup or delivery</p>	<p>965.00 995.00 1,595.00 2,545.00 35.00</p> <p>$\times 54 = 26170$</p>



STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION
DBE GOOD FAITH EFFORTS DOCUMENTATION
 DES-OE-0102.11A (REV 12/2014)

Bidder's Name: STERMAN ENT.
 Contract No.: 07-307304

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2. List the names of certified DBEs and all the dates on which they were solicited to bid on this project. Include the items of work offered and the dates and methods used for following up initial and follow-up solicitations to determine with certainty whether the DBEs were interested. Attach copies of solicitations, e-mail messages, telephone records, fax confirmations, etc.

Name of DBE Solicited	Date of Initial Solicitation	Items of Work Offered	Follow Up Methods and Dates
KRL SAFETY	8-16-16	2 & 3	EMAIL

3. For each item of work made available, indicate whether the Bidder provided plans and specifications specific to the items of work being offered, list the selected firm and its status as a DBE, the DBEs that provided quotes, the price quote for each firm, and the price difference for each DBE if the selected firm is not a DBE. Provide copies of each DBE and Non-DBE quote submitted to the Bidder whenever a Non-DBE firm was selected over a DBE for work on the Contract.

Items of Work	Provided Plans/ Specifications for Work Offered Yes/No	Name of Selected Firm	DBE or Non-DBE	Name of Rejected Firm	Quote (\$)	Price Difference (\$)
2	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	KRL SAFETY	PBE		22156	
3	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	KRL SAFETY	DBE		8630	
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					

If the firm selected for the item is not a DBE, provide the reasons for the selection on a separate sheet and attach names, addresses, and phone numbers for the firms listed above. Provide evidence as to why additional agreements could not be reached for DBEs to perform work.

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Contract No. 07-307304

Bidder's Name: STERLING ENT.
Contract No.: 07-307304

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4. Describe the Bidder's outreach efforts to identify and solicit the interest of all certified DBEs that have the capability to perform the work of the Contract. Provide copies of supporting documents.

Description of Outreach	Dates	Location (if applicable)	Results
N/A			

5. Describe the Bidder's efforts made to provide interested DBEs with adequate information about the plans, specifications, and requirements of the Contract to assist them in responding to a solicitation. Identify the DBEs assisted, the type of information provided, and the date of the contracts. Provide copies of supporting documents.

N/A

6. Describe the Bidder's efforts made to assist interested DBEs in obtaining bonding, lines of credit, or insurance. Identify the DBEs assisted, the type of assistance offered, and the dates. Provide copies of supporting documents.

N/A

7. Describe the Bidder's efforts made to assist interested DBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, excluding supplies and equipment the DBE purchases or leases from the prime contractor or its affiliate. Identify the DBEs assisted, the type of assistance offered, and the dates. Provide copies of supporting documents. List efforts made to assist interested DBEs in obtaining bonding, lines of credit, insurance, necessary equipment, supplies, materials, or related assistance or services, excluding supplies and equipment the DBE subcontractor purchases or leases from the prime contractor or its affiliate. Identify the DBE assisted, the assistance offered, and the date. Provide copies of supporting documents.

N/A

8. List the names of agencies and the dates on which they were contacted to provide assistance in contacting, recruiting, and using DBE firms. If the agencies were contacted in writing, provide copies of supporting documents.

N/A

9. Include additional data to support a demonstration of good faith efforts.

N/A

NOTE: USE ADDITIONAL SHEETS OF PAPER IF NECESSARY.

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Contract No. 07-307304

Bidder's Name: TERESA ENT
Contract No.: 07-307304

1. List items of work the Bidder made available to DBE firms. Identify items of work the Bidder might otherwise perform with its own forces, items that have been broken down into economically feasible units to facilitate DBE participation, and items for which the Bidder has established flexible time frames for performance and delivery schedules in a manner that encourages and facilitates DBE participation. For each item listed, show the dollar value and percentage of the total contract. The Bidder must demonstrate that sufficient work to meet the goal was made available to DBE firms.

[illegible]

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